## ADDENDUM TO ENROLLMENT FORM FOR CHILD CARE

		Name of Ch	ild Care Facil	ity		
Instructions: This A Child and Adult Care Department of Agric year following the day	e Food Prog ulture on S	gram as manda eptember 1, 20	ted by the Inter 04. The Adde	rim Rule iss ndum will l	sued by the U	J.S.
Participant Name:						
	Last		First		Middle Initial	
Normal Days of Car	re (Circle :	as Appropriat	e):			
Monday	Гuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Normal Hours of C	are during	School Year:		,	•	
Normal Hours of C	are durino	Summer	-	to		
Tionnal Hours of C	are during	, Summer .		to		
Participant Meals (	Circle as A	appropriate):				
Breakfast	AM Sup	plement	Lunch			
PM Supplem	ent S	upper Eve	ening Supplem	ent		
Parent/Guardian N		ast	First		M	iddle Initial
Parent/Guardian D	aytime Te	lephone Numb	oer: Area Code	e: N	umber:	-

Signature of Parent/Guardian

Date of Signature